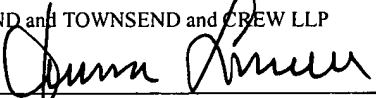


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On November 20, 2003

TOWNSEND and TOWNSEND and CREW LLP

By:   
Aurora Lowell

PATENT  
Attorney Docket No.: 019930-002800  
Client Ref. No.: A1297

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

David Miller, *et al.*

Application No.: 10/087,040

Filed: February 28, 2002

For: SYSTEMS AND METHODS FOR  
OVERCOMING STICTION

Customer No.: 20350

Confirmation No. 6478

Examiner: Thomas M. Dougherty

Technology Center/Art Unit: 2834

PRELIMINARY AMENDMENT

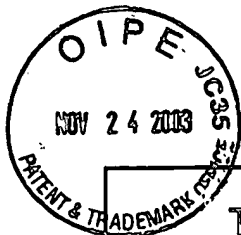
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Prior to examination of the above-referenced application, please enter the following amendments and remarks:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 7 of this paper.



Image

2834

PTO/SB/21 (08-03)

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/087,040
		Filing Date	February 28, 2002
		First Named Inventor	Miller, David
		Art Unit	2834
		Examiner Name	Thomas M. Dougherty
Total Number of Pages in This Submission	1	Attorney Docket Number	019930-002800

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Preliminary Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual	Townsend and Townsend and Crew LLP Irvin E. Branch Reg. No. 42,358	
Signature		
Date	November 20, 2003	

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Typed or printed name	Aurora Lowell		
Signature		Date	November 20, 2003